2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002434

Entity Name: G4S SECURE INTEGRATION LLC

Current Principal Place of Business:

9140 WEST DODGE ROAD SUITE 100

OMAHA, NE 68114

Current Mailing Address:

161 WASHINGTON STREET

SUITE 600

CONSHOHOCKEN, PA 19428 US

FEI Number: 43-1965877 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Apr 10, 2025

Secretary of State

9756304937CC

Authorized Person(s) Detail:

AUTHORIZED MEMBER Title Title EVP, SECRETARY

SECURADYNE SYSTEMS Name Name CECIL, LORETTA A

INTERMEDIATE LLC Address **450 EXCHANGE**

Address **450 EXCHANGE** City-State-Zip: IRVINE CA 92602

IRVINE CA 92602 City-State-Zip:

CHIEF FINANCIAL OFFICER AND Title CHIEF EXECUTIVE OFFICER AND Title **TREASURER**

PRESIDENT

BRANDT, TIMOTHY E Name JONES, STEVEN S. Name

450 EXCHANGE Address Address **450 EXCHANGE**

SUITE 650

IRVINE CA 92602 City-State-Zip: City-State-Zip: IRVINE CA 92602

DIVISION PRESIDENT Title Title VP, INTERNATIONAL BUSINESS

DEVELOPMENT BOETHEL, CAREY Name

FULLER, TRACY Name 3440 SOJOURN DRIVE Address

450 EXCHANGE Address SUITE 220

CARROLLTON TX 75006 City-State-Zip: City-State-Zip: IRVINE CA 92602

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

04/10/2025 SIGNATURE: LORETTA A CECIL SECRETARY